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FAMILY NAME: CEULEMANS
GIVEN NAME: RAPHAEL ANGELINE ALFONS
PRIORITY CLAIMED (Y/N): N
NO BASIC FEE (Y/N): N
ATTORNEY DOCKET NUMBER: CM1882

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US DESIGNATED ONLY (Y/N): N
COUNTRY:

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APPLICATION TITLES:
FABRIC CARE COMPOSITIONS

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Patent Division - 2N1805-BA630



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Bib Data Sheet

CONFIRMATION NO. 5069

SERIAL NUMBER 09/744,267	FILING DATE 01/22/2001 RULE	CLASS 510	GROUP ART UNIT 1751	ATTORNEY DOCKET NO. CM1882
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APPLICANTS

Raphael Angeline Alfons Ceulemans, Lubbeek, BELGIUM;
Axel Masschelein, Brussels, BELGIUM;
Roberta Rongnui Wu, Loveland, OH;

**** CONTINUING DATA *******

THIS APPLICATION IS A 371 OF PCT/US98/15955 07/31/1998

**** FOREIGN APPLICATIONS *******

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY BELGIUM	SHEETS DRAWING	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after				
Verified and Acknowledged Examiner's Signature: <u>[Signature]</u> Initials: <u>[Initials]</u>				

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TITLE

Fabric care compositions

FILING FEE RECEIVED 860	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
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		<input type="checkbox"/> 1.18 Fees (Issue)
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Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		STATE OR COUNTRY BELGIUM	SHEETS DRAWING	TOTAL CLAIMS 11	INDEPENDENT CLAIMS 2
ADDRESS 27752 THE PROCTER & GAMBLE COMPANY INTELLECTUAL PROPERTY DIVISION WINTON HILL TECHNICAL CENTER - BOX 161 6110 CENTER HILL AVENUE CINCINNATI, OH 45224					
TITLE Fabric care compositions					
FILING FEE RECEIVED 860	FEES: Authority has been given in Paper. No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)		